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**\*BIBDATASHEET\***

CONFIRMATION NO. 1852

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<b>SERIAL NUMBER</b> 10/502,284	<b>FILING OR 371(c) DATE</b> 07/22/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1654	<b>ATTORNEY DOCKET NO.</b> 27419/150
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/EP03/00519 01/17/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

ITALY MI20002A000189 02/01/2002

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> ITALY	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 8	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

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**TITLE**

COMPOSITION AND A METHOD FOR TREATING HAIR LOSS

<b>FILING FEE RECEIVED</b> 503	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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